



## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application No.	10/676,795
		Filing Date	September 30, 2003
		First Named Inventor	Mark R. Richards
		Art Unit	2813
		Examiner Name	Smoot, Stephen W.
Total Number of Pages in This Submission	22	Attorney Docket Number	42P17287

### ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form  <input checked="" type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment / Response <div style="margin-left: 20px;"> <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)         </div> <input checked="" type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement <div style="margin-left: 20px;"> <input type="checkbox"/> PTO/SB/08         </div> <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <div style="margin-left: 20px;"> <input type="checkbox"/> Basic Filing Fee  <input type="checkbox"/> Declaration/POA         </div> <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):	<div style="border: 1px solid black; padding: 5px; height: 100px; vertical-align: top;">           Return Receipt Postcard         </div>	
			Remarks	

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Mark A. Kupanoff, Reg. No. 55,349  BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	May 11, 2005

### CERTIFICATE OF MAILING/TRANSMISSION

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Based on PTO/SB/21 (04-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wlr) 06/04/2004.  
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